24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Win Justice		C C00672394
		0 00072334
Check if 24-hour report 48-hour report New report	ort X Amends report	filed on 10 24 2020
Full Name of Payee		Date of Public Distribution/Dissemination
Garoi Media LLC		10 23 2020
Mailing Address Lasana Smith		
8901 NW 183rd St		Amount
City State	Zip Code	26.88
Miami FL	33018	Transaction ID : 24-00-00102-00102 Date of Disbursement or Obligation
Purpose of Expenditure Yard Sign Design	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	x Support C	Office Sought: House District: 13
Crist, Charlie, Joseph, ,	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary
Full Name of Payee		Date of Public Distribution/Dissemination
Garoi Media LLC [MEMO ITEM]		10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address Lasana Smith		
8901 NW 183rd St		Amount
City State	Zip Code	26.88
Miami FL	33018	Transaction ID : 24-00-00101-00101 Date of Disbursement or Obligation
Purpose of Expenditure Yard Sign Design	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	x Support C	Office Sought: House District: 15
Cohn, Alan, Michael, ,	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2020
(a) SUBTOTAL of Itemized Independent Expenditures		0
		7 7
(b) SUBTOTAL of Unitemized Independent Expenditures)	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	·
	ically Filed] Date	12 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	'	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Win Justice		C C00672394
Check if 24-hour report 48-hour report New	report X Amends report f	illed on 10 24 2020
Full Name of Payee		Date of Public Distribution/Dissemination
Garoi Media LLC		10 23 2020
Mailing Address Lasana Smith		Amount
8901 NW 183rd St		
City State	Zip Code	26.88
Miami FL	33018	Transaction ID: 24-00-00099-00099 Date of Disbursement or Obligation
Purpose of Expenditure Yard Sign Design	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	X Support O	ffice Sought: House District: 18
Keith, Pam, , ,	Oppose	President Senate State: FL
Calendar Year-To-Date		isbursement For: Primary X General
Per Election for Office Sought		O20 Other (specify) >
Full Name of Payee Garoi Media LLC		Date of Public Distribution/Dissemination
X		10 23 / Y Y Y Y Y
Mailing Address Lasana Smith		
8901 NW 183rd St		Amount
City State	Zip Code	26.88
Miami FL	33018	Transaction ID : 24-00-00100-00100 Date of Disbursement or Obligation
Purpose of Expenditure Yard Sign Design	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	x Support C	Office Sought: House District: 26
Mucarsel-Powell, Debbie, , ,	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		oisbursement For: Primary
	,	Guier (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	······••••••••••••••••••••••••••••••••	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authori party committee) any political party committee or its agent.		
	tronically Filed] Date	12 21 2020
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Win Justice	C C00672394
Check if 24-hour report 48-hour report New report Amends report	rt filed on 10 24 2020
Full Name of Payee Do Big Things	Date of Public Distribution/Dissemination
Mailing Address PO Box 128	10 23 7 2020
	Amount
City State Zip Code	137552.59
Mill Valley CA 94942	Transaction ID: 24-02-00526-00740 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ads - (Correction to Estimated Amount - FEC-1465726) Category/ Type	10 23 / 2020
Name of Federal Candidate Support	Office Sought: House District: 00
Biden, Joseph, R, ,	resident Senate State:
Calcilaal Ical Ic Batc	Disbursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Everyday People	10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2606 Ninth St	
	Amount
City State Zip Code	7033.03
Berkeley CA 94710	Transaction ID: 24-02-00533-00747 Date of Disbursement or Obligation
Purpose of Expenditure In-Kind Phone Banking Category/ Type	10 23 / 2020
Name of Federal Candidate Support	Office Sought: House District: 00
Biden, Joseph, R, , Oppose	🗶 President Senate State:
Calendar Year-To-Date Per Election for Office Sought 4320887.18	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	144585.62
(b) SUBTOTAL of Unitemized Independent Expenditures	·
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were n with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Pateriya, Deepak, , , [Electronically Filed] Date	12 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼
Win Justice	C C00672394
	000012394
Check if 24-hour report 48-hour report New report Amends report filed on 10	
Full Name of Payee Solidarity Strategies, LLC	Public Distribution/Dissemination
X 10	
Mailing Address 247 16th St SE Amount	
City State Zip Code	7500.00
Washington DC 20001 Transact	tion ID: 24-00-00098-00098 Disbursement or Obligation
Purpose of Expenditure Radio Ad Production - To be paid at a later date Category/ Type	
Name of Federal Candidate X Support Office Sought:	House District: 00
Biden, Joseph, R, , Oppose President	
Calendar Year-To-Date Disbursement F	
Per Election for Office Sought 0.00 Othe	er (specify) ►
Full Name of Payee Date of	Public Distribution/Dissemination
M -	M / D D / Y Y Y Y
Mailing Address Amount	
City State Zip Code	
	7
Purpose of Expenditure	Disbursement or Obligation
Category/ Type	M / D - D / T - T - T - T
Name of Federal Candidate Support Office Sought:	House District:
Oppose President	Senate State:
Calendar Year-To-Date Per Election for Office Sought Disbursement F	For: Primary General
Per Election for Office Sought Other	er (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(a) SUBTUTAL OF REHIZED INDEPENDENT EXPENDITURES	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7
(c) TOTAL Independent Expenditures	
(c) TOTAL Independent Expenditures	144639.38
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coo with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
Pateriya, Deepak, , , [Electronically Filed] Date 12	21 2020
Signature	